

Florida Department of State  
Division of Corporations  
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Email Address: lsciarrino@wfhcfl.org

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
WHOLE FAMILY HEALTH CENTER, INC.**

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Whole Family Health Center, Inc.

DOCUMENT NUMBER: N97000002128

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John E. Moore, III

(Name of Contact Person)

The Law Offices of John E. Moore, III, PLLC

(Firm/ Company)

3240 Cardinal Drive, Suite 200

(Address)

Vero Beach, Florida 32963

(City/ State and Zip Code)

lsciarrino@wfhcfl.org

E-mail address: (to be used for future annual report notification)

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(772)

234-8344

(Name of Contact Person)

at

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**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Articles of Amendment  
to  
Articles of Incorporation  
of  
Whole Family Health Center, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N97000002128

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)**

725 N U.S. Highway 1

Fort Pierce, FL 34950

**C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)**

725 N U.S. Highway 1

Fort Pierce, FL 34950

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City) Florida (Zip Code)

**New Registered Agent's Signature. If changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position*

Signature of New Registered Agent, if changing

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
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6) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____

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**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

1. Introduction  
 2. Background  
 3. Methodology  
 4. Results  
 5. Conclusion  
 6. References  
 7. Appendix  
 8. Figure 1  
 9. Figure 2  
 10. Figure 3  
 11. Figure 4  
 12. Figure 5  
 13. Figure 6  
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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

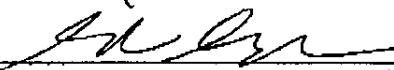
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(no more than 90 days after amendment file date)

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Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 2/23/16

Signature   
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Charles Cunningham

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

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**ARTICLE IV**  
**General and Specific Purposes**

The specific and primary purpose of this Corporation is to operate a medical center that provides primary and preventive care, HIV/AIDS and behavioral health services to individuals regardless of their socio-economic status. The Corporation may operate a Community Pharmacy. The Corporation may also conduct clinical research to advocate and significantly improve the health of those individuals afflicted with life threatening disease.

In furtherance of such purposes, the Corporation shall have full power and authority to conduct all business necessary to achieve the above-described ends.

Without limited the generality of the foregoing:

1. This Corporation is organized exclusively for charitable, religious, educational and scientific purposes, within the meaning of Section 501(c)(3) of the Internal Revenue Code.

2. No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its Directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in these Articles of Incorporation.

3. No part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

4. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on (a) by a Corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, (b) by a Corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or (c) by a nonprofit Corporation organized under the laws of the State of Florida, pursuant to the provisions of Chapter 617 of The Florida Statutes.

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